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**Carter, DeLuca, Farrell
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To:	Examiner Alton Pryor	From:	Michael R. Brew
Fax:	(703)872-9306	Date:	October 21, 2004
Phone:	(571) 272-0621	Pages:	12 (incl. Cover)
Re:	Amendment	CC:	

☒ **Urgent** ☐ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

•Comments:

**Attached is an amendment for U.S. Application Serial No.:
09/807,254.**

Please deliver these documents to Examiner Pryor as soon as possible.

**Thank you,
Jennifer Puente
Legal Secretary to Michael Brew, Esq.**

PATENT

Atty. Docket No.: 960-4

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Tuzun et al. Examiner: A. Pryor
 Serial No.: 09/807,254 Group: Art Unit 1616
 Filed: July 9, 2001 Dated: October 21, 2004
 For: NATURAL AND SAFE ALTERNATIVE TO FUNGICIDES,
 BACTERIOCIDES, NEMATICIDES AND INSECTICIDES FOR PLANT
 PROTECTION AND AGAINST HOUSEHOLD PESTS

Mail Stop Amendment
 Commissioner for Patents
 P.O. Box 1450
 Alexandria, VA 22313-1450

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AMENDMENT TRANSMITTAL FORM

Sir:

Transmitted herewith is an amendment in the above-identified application.

- [] Small entity status of this application under 37 C.F.R. § 1.9 and 1.27 has been established by a verified statement previously submitted.
- [] A verified statement to establish small entity under 37 C.F.R. § 1.9 and 1.27 is enclosed.
- [X] No additional fee is required.

The fee has been calculated as shown below:

	(Col. 1)	(Col. 2)	(Col. 3)	SMALL ENTITY	OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDIT. RATE FEE	ADDIT. RATE FEE
TOTAL	44* MINUS ** 96	= 0	X 9 \$	X 18 \$0.00	
INDEP.	2* MINUS ** 10	= 0	X 42 \$	X 84 \$0.00	
□ FIRST PRESENTATION OF MULTIPLE DEP. CLAIM			X 140 \$	X 280 \$0	
			TOTAL	OR TOTAL	\$0.00
			ADDIT. FEE	\$ -0-	

* If the entry in Col. 1 is less than entry in Col. 2, write "0" in Col. 3.

** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 20, enter "20".

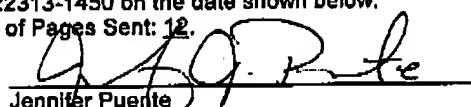
*** If the "Highest No. Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The Highest No. Previously Paid For (Total or Indep.) is the highest number found in the appropriate box in Col. 1 of a prior amendment or the number of claims originally filed.

CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being transmitted by facsimile to the Mail Stop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.
 Fax No.: (703)872-9306 and (571)-273-0621. Total Number of Pages Sent: 12.

Dated: October 21, 2004


 Jennifer Puente

- ☐ Please charge Deposit Account No. 50-2140 in the amount of \$____. Two (2) copies of this sheet are enclosed.
- ☐ A check in the amount of \$0 is enclosed.
- ☒ Please charge any deficiency as well as any other fee(s) which may become due under 37 C.F.R. § 1.16 and/or 1.17 at any time during the pendency of this application, or credit any overpayment of such fee(s) to Deposit Account No. 50-2140. Also, in the event any extensions of time for responding are required for the pending application(s), please treat this paper as a petition to extend the time as required and charge Deposit Account No. 50-2140 therefor. TWO (2) COPIES OF THIS SHEET ARE ENCLOSED.

Respectfully submitted,



Michael R. Brew
Reg. No.: 43,513
Attorney for Applicant(s)

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MRB/jjp

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant(s): Tuzun, et al.

Examiner: A. Pryor

Serial No.: 09/807,254

Group: Art Unit: 1616

Filed: July 9, 2001

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Alexandria, VA 22313-1450

AMENDMENT

In response to telephone conversations with the Examiner in the instant application,
kindly amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2
of this paper.

Remarks begin on page 9 of this paper.

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